PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/574,887			ling Date 12/2007	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE	_	N/A	LED	N/A		N/A	TLL (v)	1	N/A	TEE (0)
$\overline{}$	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))			A1/A				1		
뉴	(37 CFR 1.16(k), (i), (ii)		N/A N/A		N/A		N/A		ł	N/A	<b>-</b>
TO	(37 CFR 1.16(o), (p), (				N/A		N/A x s =		OR	N/A x s =	
(37 IND	CFR 1.16(i)) EPENDENT CLAIM	is	minus 20 = *			H	x \$ =		UR	x s =	
(37	CFR 1.16(h))	If the		evened 100	l I	X 5 -		ł	X 5 -		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).							
	MULTIPLE DEPEN	DENT CLAIM PR	ESENT (3	7 CFR 1.16(j))		IJ			J		
* If	the difference in colu	umn 1 is less than	r "0" in column 2.	-	TOTAL		J	TOTAL			
	APPI	(Column 1)	OED - PART II		OTHER THAN SMALL ENTITY OR SMALL ENTITY						
Н		CLAIMS	HIGHE		ST T				Ë		
AMENDMENT	04/12/2010	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 14	Minus	<del></del> 20	= 0	]	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	<b></b> -3	= 0	П	x \$ =		OR	X \$220=	0
M	Application Size Fee (37 CFR 1.16(s))										
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)			·			
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ᆲ	Total (37 CFR 1,16(i))		Minus		=	H	x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	***	:	1	x \$ =		OR	x s =	
ΞI	Application Size Fee (37 CFR 1.16(s))					П			]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
Г							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" [Cotal or independent) is the highest number found in the appropriate box in column 1.											

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